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**CONFIRMATION NO. 1147**

<b>SERIAL NUMBER</b> 09/976,271	<b>FILED DATE</b> 10/15/2001  <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2152	<b>ATTORNEY DOCKET NO.</b> 81032-0101
<b>APPLICANTS</b> Richard L. Gobbi, Potomac, MD; Faris Faris, Bethesda, MD; <div style="text-align: center; font-size: 1.2em; margin-top: 10px;">YES HXN</div>				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/239,883 10/13/2000 <div style="text-align: center; font-size: 1.2em; margin-top: 10px;">NO HXN</div>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/16/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
<b>Verified and Acknowledged</b> <div style="display: flex; justify-content: space-between;"> <span>Examiner's Signature _____</span> <span>Initials _____</span> </div>				
<b>ADDRESS</b> 24633				
<b>TITLE</b> Distributed IP over ATM architecture				
<b>FILING FEE RECEIVED</b> 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> All Fees</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.16 Fees ( Filing )</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.18 Fees ( Issue )</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> Other _____</div> <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> Credit</div>		